



# 2020-2021 Special Conditions Form

The Special Circumstances form is for students who have exceptional circumstances which are not taken into account through the initial FAFSA process. Please complete this form indicating your circumstances and submit it to our office with the required documentation. Review of special circumstances will take place after you complete a 2020-2021 FAFSA and after you receive an initial 2019-2020 award.

**Ineligible Circumstances**—The Office of Financial Assistance will not consider or make adjustments to your award package for any of the following circumstances:

- Parents refuse to help pay for college
- Mortgage, rent, car, and car insurance
- Consumer debt (credit cards, etc)
- Medical insurance premiums
- Reduced bonus incomes or commissions or lottery/gambling winnings
- Chapter 7 Bankruptcy or reductions in income from bankruptcy proceedings
- Unusual expenses related to personal living (such as wedding expenses, loan payments, or legal fees)
- Home equity, IRA, 403B, and 401K loans
- Initial taxable retirement funds, pensions, or distributions

## A. Student Information

_____	_____	_____	_____
Last Name	First Name	M.I.	Student ID #
_____			
Address (include apt. no)			
_____	_____	_____	_____
City	State	Zip Code	Phone Number (include Area Code)

## B. Reason for Request

Loss of Income

- Attach a letter explaining the circumstances around the involuntary loss of income (terminated, laid off, injury or illness, reduction in hours)
- Submit separation letter from previous employer or doctor's note if related to illness or injury
- Submit all 2018 W2s for the household
- Submit a signed copy of your 2019 tax return transcript OR signed 2019 1040 tax return

Reduction in Income Due to Divorce or Death of Spouse or Parent

- Attach a letter explaining the date of the divorce or death of spouse or parent.
- Submit official divorce decree and/or death certificate
- Submit all household 2018 W2 forms

Office Use Only					RRAAREQ: SCF BDM: Special Conditions
_____	_____	_____	_____	_____	
Date Received	Received By	Tracked	RHACOMM	Imaged	

Dislocated Worker (student, parent, or spouse)

- Submit a detailed statement regarding circumstances for loss of employment
- Proof of unemployment benefits due to layoff or loss of job (unemployment benefits statement)
- Proof from former employer indicating layoff or loss of job; must include last day of employment
- Proof that self-employment is terminated due to economic conditions or natural disaster (detailed statement)
- Proof of being a dislocated homemaker who is no longer supported by the spouse and is now having trouble finding or upgrading employment (detailed statement and/or divorce decree, etc)

 Unusual Medical Expenses

- Attach a detailed letter explaining what the medical expenses are for.
- Attach a copy of medical and/or dental expenses paid out of pocket. Submit paid receipts.

 Private School Tuition Expenses

- Attach a detailed letter explaining for whom in the household the tuition is for.
- Attach a copy of your invoice from the secondary school tuition expenses dated within the academic year (July 2020-

**C. Certification and Signature** (*Digital Signature Not Accepted*)

I certify that all of the information reported on this worksheet is complete and correct. The student and, if dependent, at least one parent must sign and date. *Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.*

\_\_\_\_\_  
Print Student's Name\_\_\_\_\_  
Student's ID Number\_\_\_\_\_  
Student's Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Print Parent's Name\_\_\_\_\_  
Parent's Signature (*required, if student is dependent*)\_\_\_\_\_  
Date

**You may submit your documentation by fax, email, or mail. Contact information is located on the first page of this form.**